FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)	
1. NAME OF COMMITTEE (in	(Check if name Example: If typying, type	Office use only 12FE4M5
APL Limited P	PAC	
ADDRESS (number and	16220 N Scottsdale Rd	
(Check if address is changed)	Suite,300	
	Scottsdale	AZ 85254
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	IL ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)		
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)		
2. DATE 0.4		
3. FEC IDENTIFICA	TION NUMBER C C00137828	1
4. IS THIS STATEM	MENT X NEW (N) OR AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct a	nd complete
	The about Meantle Transcome	
Type or Print Name of	Treasurer Timothy J. Windle, Treasurer	
Signature of Treasurer	Electronically Filed by Timothy J. Windle, Treasurer	Date 01 / 18 / Y Y Y Y
NOTE: Submission of fal	lse, erroneous, or incomplete information may subject the person signing this Stat	
Office Use Only	For further information Federal Election Commis Toll Free 800-424-9530	